STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Van Hollen for Senate 10605 Concord St ADDRESS (number and street) Ste 202 (Check if address is changed) Kensington 20895 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS stacey@vanhollen.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.vanhollen.org (Check if address is changed) DATE 2020 C00573758 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Maud, Stacey, , , Type or Print Name of Treasurer Maud, Stacey, , , [Electronically Filed] 10 29 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo i	rm 1 (Revised 02/2009) Page 2
		OMMITTEE
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Van Hollen, Chris, , ,
Cano	didate didate y Affiliatio	Office State
(c) Nam Cand	e of didate	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Par	tv Con	nmittee:
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party
Poli	itical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	t Fund	Iraising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	

FEC Form 1 (Revised (22/2000)	Page 3
Write or Type Committee Name		rage 3
Van Hollen for S		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	in PAC Sponsor
-		ртио ороноог
Van Hollen/McGrath V	ictory Fund 2020	
Mailing Address	10605 Concord St	
	Ste 202	
	Kensington	
	CITY STATE Z	ZIP CODE
Relationship: Connected	d Organization	dership PAC Sponsor
	a organization in James and Committee in Jame	
Custodian of Records: Identification books and records.Maud, StarFull Name	ntify by name, address (phone number optional) and position of the person in poss	ession of committee
Mailing Address	10605 Concord St	
	Ste 202	
	Kensington MD 20895	
Title or Position	CITY STATE Z	IP CODE
Treasurer		3768
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	e and address of
Full Name Maud, Stac	Cey, , ,	
Mailing Address	10605 Concord St	
-	Ste 202	
	Kensington MD 20895	
Title on Decision	CITY STATE Z	IP CODE
Title or Position Treasurer		42 3768

FEC Form			
Full Name of Designated Agent	Maud, Stacey, , ,		
Mailing Address	10605 Concord St		
	Ste 202		
	Kensington	MD	20895
	CITY	STATE	ZIP CODE
Title or Position Treasurer	Telephone numb	per 3	01 - 942 - 3768
Banks or Other	r Depositories: List all banks or other depositories in which the committee	e deposits	funds, holds accounts, rents
safety deposit be	oxes or maintains funds.		
Name of Bank,	oxes or maintains funds.		
	oxes or maintains funds. Depository, etc.		
	oxes or maintains funds.		
	oxes or maintains funds. Depository, etc. M&T Bank 10420 Montgomery Ave		
Name of Bank,	oxes or maintains funds. Depository, etc. M&T Bank 10420 Montgomery Ave		
Name of Bank,	oxes or maintains funds. Depository, etc. M&T Bank 10420 Montgomery Ave	MD	20895
Name of Bank,	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington	MD STATE	20895 ZIP CODE
Name of Bank,	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington CITY		
Name of Bank, Mailing Address	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington CITY		
Name of Bank, Mailing Address Name of Bank,	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington CITY Depository, etc.		
Name of Bank, Mailing Address	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington CITY Depository, etc.		
Name of Bank, Mailing Address Name of Bank,	Depository, etc. M&T Bank 10420 Montgomery Ave Kensington CITY Depository, etc.		

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Form/Schedule: F1A
Transaction ID:

Amended to include the addition of Van Hollen/Greenshield Victory Fund as a Joint Fundraising representative, effective January 13, 2020.

Form/Schedule: Transaction ID:

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Van Hollen/Gideo	on Joint Fund 2020		
	10005 0 100		
Mailing Address	10605 Concord St		
	Ste 202		
	Kensington	MD	20895
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Join y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identif	by by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address	by by name, address (phone number – optional) CITY		
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esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin g	ן Participant:			
	1		FEC I	D number	C
	2.		FEC I	D number	C
	3.		FEC I	D number	C
	4.		FEC	D number	C
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fu	ndraising Re	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	10605 Concord St			
		Ste 202 Kensington		ı MD ı	20895
	Relationship:	CITY ▲		STATE A	ZIP CODE A
			oint Fundraisir		
8.		by name, address (phone number – optional)			
	Full Name	1			
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone I	Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in whi ntains funds.	ch the comm	nittee deposit	s funds, holds accounts, rents
	Mailing Address				
	3				
		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
Van Hollen for Co	ongress		
Mailing Address	10605 Concord St		
Mailing Address	Ste 202		
	Kensington	, MD	20895
Relationship:	CITY A	STATE A	ZIP CODE A
		t Fundraising Represent	ative Leadership PAC Sp
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Connecte esignated Agent: Identif	d Organization X Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization X Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Joint by by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Joint by by name, address (phone number – optional) CITY CITY Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

o(g) or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	10605 Concord St		
Mailing Address	Ste 202		
	Kensington	MD	20895
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
. Designated Agent: Identi	Affiliated Committee Joint Ify by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sponso
Full Name	1		
Mailing Address			
TITLE OR POSITION	N ▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Tel	lephone Number	
Banks or Other Deposite safety deposit boxes or management Name of Bank, Depository, etc.	ories: List all banks or other depositories in which the naintains funds.	he committee deposit	s funds, holds accounts, rents
Mailing Address	T		
			<u> </u>

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ing i artiorpant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
	40005 Canada Ct		
Mailing Address	10605 Concord St		
	Ste 202		
	Kensington	MD MD	20895
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Spo
	ed Organization Affiliated Committee	at Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee	at Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
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Designated Agent: Identi Full Name Mailing Address	Affiliated Committee		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY CITY Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identic Full Name	Affiliated Committee Affiliated Committee Type by name, address (phone number – optional) CITY CITY CITY Dries: List all banks or other depositories in which	STATE A	ZIP CODE A